



THE COMMONWEALTH OF MASSACHUSETTS
EXECUTIVE OFFICE OF ENVIRONMENTAL AFFAIRS
Department of Agricultural Resources
251 Causeway Street, Suite 500, Boston, MA 02114
617-626-1700 fax 617-626-1850 www.Mass.gov/AGR



MITT ROMNEY
Governor

ROBERT W. GOLLEDGE, JR.
Secretary

KERRY HEALEY
Lieutenant Governor

DOUGLAS P. GILLESPIE
Commissioner

EQUINE DEALER/TRANSPORTER LICENSE APPLICATION

License year November 1, 2006 to October 31, 2007

Every person who is in the business of dealing or auctioning equine animals, or engaged in the transportation of equine animals for the purpose of dealing, auctioning or slaughter, (and/or has a Massachusetts Tax number for such purposes), is required by Massachusetts General Law, Chapter 129, Sections 45, 46, 47 and 48, to obtain a license from the Commonwealth of Massachusetts. Each truck or trailer used for such purposes, must bear a metal license plate issued by the Commonwealth, affixed as in Section 46.

Read and fill out the application information below and mail to the Bureau of Animal Health accompanied by a bank check or money order for the correct fee. The fee for the License is \$50.00 (**except for those who are licensed under Chapter 128, Section 2B (Riding School/Stable)**). This Dealer License fee for those licensed as a Riding School/Stable is \$10.00; the Stable License Number must be included on this application. Each vehicle *in* which animal(s) are transported requires a plate and decal. The fee for the decal is \$5.00. There is no fee for the plate.

ALL LICENSES MUST BE POSTED OR IN POSSESSION, AND RECORDS MAINTAINED ACCORDING TO 330 CMR 16.04 sections 1(g) and 4(a). PLATES MUST BE AFFIXED TO THE VEHICLE(S).

Any questions or problems should be referred to the Bureau of Animal Health at the address on top of this application or by phone at (617) 626-1797.

BUSINESS NAME: _____ PHONE: _____
ADDRESS: _____
OWNER'S NAME: _____
PREMISE ADDRESS: (if different) _____
Please state license use: DEALER _____ AUCTION _____ TRANSPORTER _____
List approximate number of animals sold/transported _____
Destinations: _____

DESCRIPTION OF VEHICLE(S) in which animals transported	VEHICLE CAPACITY	PLATE NO.
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

I certify under penalties of perjury that I have read Chapter 129, Sections 45, 46, 47 and 48 of the Massachusetts General Laws and their Rules and Regulations, and agree to abide by them.

Signature

Date

MONEY ORDER OR BANK CHECK IS PAYABLE TO COMMONWEALTH OF MASSACHUSETTS AND SENT TO BUREAU OF ANIMAL HEALTH, 251 CAUSEWAY ST., SUITE 500, BOSTON, MA 02114.